

By Cdr. Kevin Brooks

pulled the sheet over the dead Marine's face and asked myself, "What in the world killed this guy?" His death didn't make sense, so I started going over what had happened.

My watch in the emergency room (ER) had just begun. It was quiet for a change until a Marine staggered in. Several corpsmen and I immediately grabbed him. He was huge, and it took all of us to get him on the gurney. I took his vital signs: His heart was beating too fast, and he had difficulty breathing. I asked him what had happened. He gasped a few words at a time, telling

me that he had been feeling fine all day. Suddenly, he couldn't catch his breath. He asked me if he was having a heart attack and said the pain was getting worse.

The indicators didn't make sense! The Marine was young, muscular, and looked healthy as a horse. It was obvious that he was a weight lifter and looked buff enough to compete as a body builder. I decided to order several tests and had just left his bedside when I heard one of the corpsmen yell, "He stopped breathing!" We worked tirelessly to get him to breathe, but nothing worked. His heart stopped a few minutes later, and he died.

I discovered later that the Marine died from a pulmonary embolism, which occurs when a blood clot forms in one of the body's veins. Eventually, the clot breaks loose and is carried to the lungs. In this Marine's case, his blood clotted in one of his leg veins. The clot broke loose and ended up in his lungs, where it clogged. Blood flow in his lungs slowed, and he couldn't get the oxygen his body desperately needed.

Unfortunately, this Marine wasn't going to be the last heavily built Marine I would have to deal with during my ER tour. A month later, we were swamped, and the nurse had brought in another patient's chart. On it was this notation: "Wants to talk to a doctor." I gave the chart to one of my corpsmen and told him to find out exactly what the patient wanted to talk about. The corpsman returned a few minutes later with a frightened look—I thought he was going to wet his pants. "What's the matter?" I asked.

"He says he wants to kill somebody!"

I told the corpsman to call the police, and I raced to the patient. As I walked in, he leaped to his feet, and I felt a shadow cast over me—he was a burly Marine, all right. I stand at six-feet-five and weigh 225 pounds, but this guy was like a mountain. I felt like a little kid. In fact, he looked as if he was about to explode out of his extra-large, but tight, clothes like the Incredible Hulk. To make matters worse, he looked as angry as the Hulk. The similarities were definitely there.

I managed to find my voice and asked, "What seems to be the problem, Marine?"

His answer was a growled, "I want to kill somebody."

I gulped and asked, "Anyone in particular?" With a glare, he said, "No, anybody will do!"

I didn't feel like a little kid anymore; now I was a bug, waiting to be squashed! I'm happy to say we got him admitted to the hospital without anyone getting hurt. But he was back in the ER a few days after he returned to his unit, this time for a physical before going to the brig.

I later found out that he was arrested for trying to beat an NCO to death. I was also told that he had been giving himself shots of a homemade mixture of steroids he'd bought from a mail-order company. He also was taking pills. Yes, he had become huge, but he also had turned himself into a raging maniac. He gave himself a case of what doctors call steroid rage.

Both Marines were weightlifters and had been using anabolic steroids to help them bulk-up. While the steroids helped them get bigger, it caused them problems that were enough to kill one and cause severe psychological problems for the other.

These two Marines weren't satisfied with getting stronger the natural way. Therefore, they decided to supplement through injection and oral pills, both of which are illegal.

While making muscles get bigger, anabolic steroids also can cause deadly effects, including liver and heart disease, and strokes. Women can grow facial hair, shrink their breasts, and become more masculine. Men can develop breasts, have pain while urinating, and become impotent and sterile. Finally, men's testicles can shrink down to the size of beans.

Taking anabolic steroids can cause other health problems, like high blood pressure, mood swings, yellowing of the skin, headaches, and shortening of final adult height. Taking anabolic steroids is not a risk worth taking.

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## **Steroids:** Natural Versus Synthetic

Steroids are naturally occurring chemicals within our bodies and are important to our health. Some of the better known steroids are estrogen and testosterone, but there are many others. Steroids can also be made in the lab. These synthetic steroids can be exact copies of natural steroids, while others have been modified, often to make them stronger.

Steroids (whether natural or synthetic) rarely have only one effect on our bodies; most of them have several. When one of these effects causes muscle growth, then that steroid is called an anabolic steroid. Testosterone is an important example: It is the male sex hormone, but it also has anabolic effects. The anabolic steroids used by athletes are often synthetic versions of testosterone, and have been modified to make the anabolic effects (muscle making) more powerful.